

Sibbet (R. L.)

DW 27

---

## THE STUDY OF MEDICINE AS A MEANS OF EDUCATION:

READ BEFORE THE AMERICAN ACADEMY OF MEDICINE AT  
ITS NINTH ANNUAL MEETING, IN NEW YORK,  
OCTOBER 28, 1885,

BY R. LOWRY SIBBET, A. B., M. D.,  
CARLISLE, PENN'A.

VICE-PRESIDENT OF THE MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA,  
FIRST SECRETARY OF THE AMERICAN ACADEMY OF MEDICINE, ELECTED  
ONE OF THE VICE-PRESIDENTS OF THE INTER-NATIONAL MEDICAL CONGRESS TO BE HELD IN WASHINGTON, D. C., IN 1887.

---

Daily and Weekly Sentinel Print, Carlisle, Pa.

18





---

---

# THE STUDY OF MEDICINE AS A MEANS OF EDUCATION:

READ BEFORE THE AMERICAN ACADEMY OF MEDICINE AT  
ITS NINTH ANNUAL MEETING, IN NEW YORK,

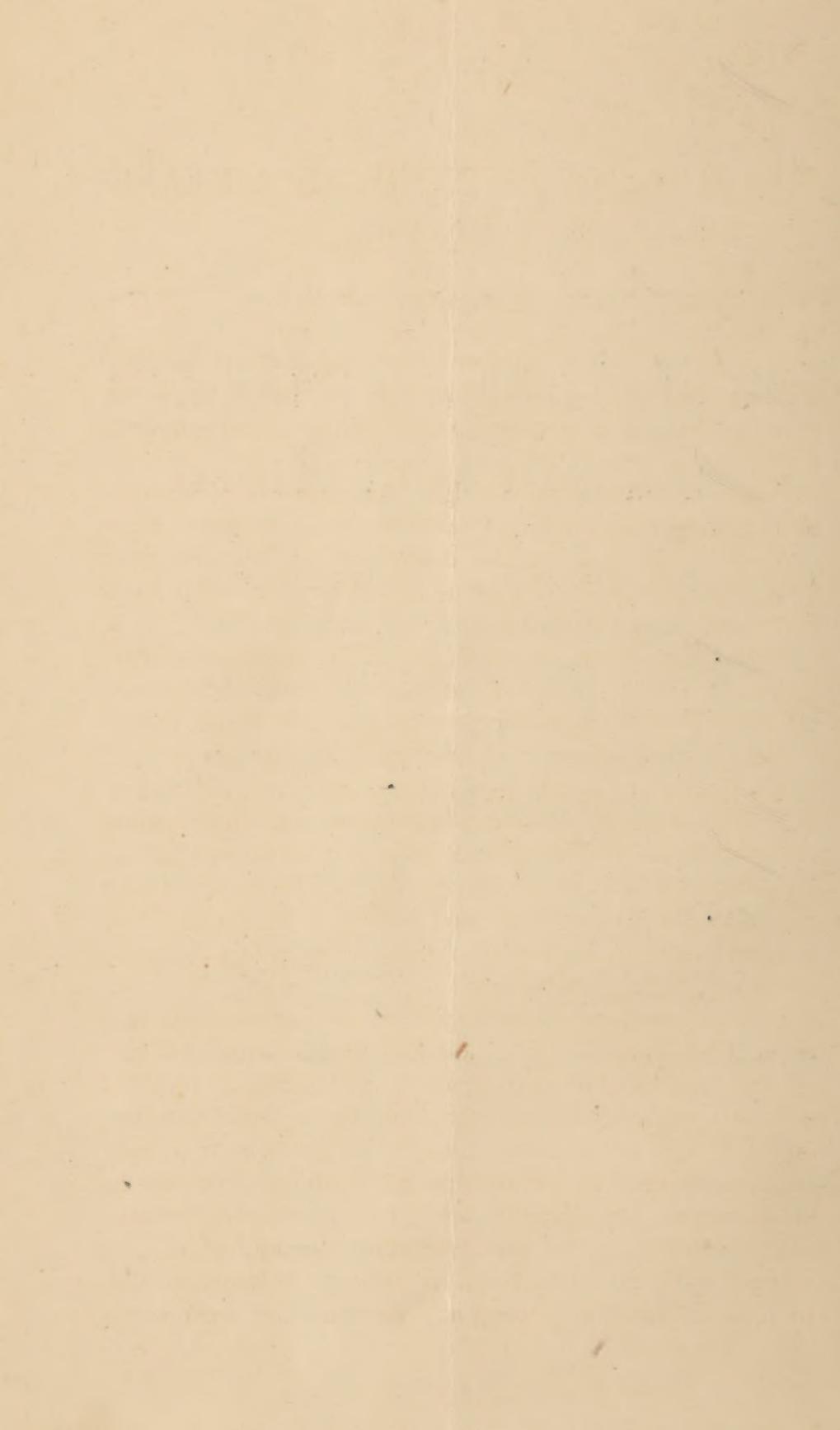
OCTOBER 28, 1885,

By R. LOWRY SIBBET, A. B., M. D.,  
CARLISLE, PENN'A.

VICE-PRESIDENT OF THE MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA,  
FIRST SECRETARY OF THE AMERICAN ACADEMY OF MEDICINE, ELECTED  
ONE OF THE VICE PRESIDENTS OF THE INTER-NATIONAL MEDICAL CONGRESS TO BE HELD IN WASHINGTON, D. C., IN 1887.

---





## THE STUDY OF MEDICINE AS A MEANS OF EDUCATION.

---

We assume that all medical journals, that all medical societies, and that all medical schools are based upon the hypothesis that the medical profession is a learned profession.

Learning includes knowledge and education. Knowledge alone never makes a learned man; he must have education with it, or mental discipline. A learned profession must therefore be composed of persons who have knowledge and education.

Knowledge is not born with the child, nor is mental discipline inherited. Both are acquired by slow processes, not suddenly, as by an effort of the will, nor by purchase, as men acquire houses and lands. Time, diligence and perseverance are necessary; many long years of faithful study are required. Books, instructors, and institutions are valuable helps; at present, they are considered indispensable. Besides these, there must be a love of study, or the student will never become a scholar. The acquisition of knowledge and mental discipline are therefore dependent upon certain conditions.

Some of the conditions might be dispensed with, but not without disadvantage. No one would think of dispensing with books, instructors, or institutions. Indeed, there is a tendency to multiply these to an indefinite extent. On the other hand, there is a disposition in our country—strange as it may appear—to eliminate the essential elements, close application and persevering effort, which include *time*, the most important element of all.

Time, says the American, is money. Money is the chief object of life. Reading, writing and arithmetic

make a good scholar. These are popular axioms—principles in the philosophy of the people, which have taken deep root in our country.

Our subject naturally leads us in the direction of our medical schools, as it is in them that the study of medicine is chiefly pursued. We are not associated with any of them, either as trustee or as professor. We are not connected with any medical journal in our country. We are not a specialist in medicine; nor a surgeon in the army or navy. We are not even a gentleman of leisure in the profession; but a general practitioner residing in one of the rich agricultural districts of Pennsylvania. These qualifications, which are chiefly negative, do not warrant the assumption that we are competent to enter into a close inspection of these institutions. On the other hand, a brief and impartial reference to them is all we propose to make. We must, however, be allowed to make use of the most reliable sources of information, and to reach such conclusions as the premises force upon us.

These institutions have already furnished a chapter of history which is not creditable to our country. There are many things of which we may be justly proud, as a nation, but certainly not of our medical schools. According to "The Conspectus of the Medical Colleges of America" published December 20th, 1884, by the Board of Health of the State of Illinois, there have been in the United States 219 medical schools—147 regular, 20 homeopathic, 24 electric, 3 physio-medical, 7 miscellaneous and 18 fraudulent. Of these, 93 have become extinct—51 regular, 7 homeopathic, 12 electric, 1 physio-medical, 5 miscellaneous, and 17 fraudulent, and 2 which exist only on paper, but nevertheless sell diplomas when they find persons stupid enough to buy them. What a contrast between these and the medical schools of our neighbors—the Canadians! They have had only 15 medical schools—all of them regular, and 12 remain.

In making use of these statistics it will not do to leave out of view any portion of these numerous institutions.

All the factors of the problem must be kept before us, if we would reach proper conclusions. But for the sake of brevity we may arrange them as follows:

1st. Those which are engaged in teaching what is known as rational medicine. Of these there are 87.

2d. Those which are engaged in teaching what has been called sectarian medicine. Of these there are 29.

The first is based upon the experience of the best informed men in all countries, and in all ages. The second is based upon the experience of small groups of practitioners residing for the most part in the United States, very few of whom have been authors of books or contributors to medical science.

About fifty years ago the first school of the kind was organized in Pennsylvania, and since this time charters have been granted by other State governments until 70 have been organized, but at present, as we have said, only 29 exist. They maintain that the old and established medical school in foreign countries, and in our own, are illiberal. It is apparent, however, that their real intentions are to revive exploded theories, and to cling to practices which the advance of science has forced the greater part of the profession to discard. Each sect or group claims the discovery of a new system of practice. Moreover, the morality of their principles, as well as their practices, is objectionable. Their persistence in the use of a *name* which has something *oracular* in it; their affected belief in the potency of infinitesimal doses; their efforts to conceal

from the people their methods of treatment; and their disposition to advertise their nostrums in the newspapers, all show a perverted moral sense. Their well known low standard for graduation in their schools, as is shown by the "Conspectus" referred to, induced some of them (I might say the greater part of them) to confer degrees upon persons who were present at lectures only a few months or weeks. From this low platform it was not difficult to step down and engage in the diploma traffic. It is estimated that the Eclectic medical colleges of Pennsylvania alone issued 30,000 fraudulent diplomas. Fortunately, however, these institutions no longer exist, and one of the principal

dependent of each other. We have no minister of public instruction as in foreign countries. Each State is allowed to charter its own institutions, and in a spirit of rivalry, multiplies schools of low grade. There is, however, a sufficiently close union between the several sections of our country to justify us in making an effort to build up our profession. An exchange of views on a subject so important cannot fail to produce good results.

Rational medicine has no need to come in conflict with sectarian practitioners of any kind; nor is there any need that it should affiliate with them in any manner. In registration and in State boards of health such distinctions need not be recognized; nor yet in State medical examining boards. It is not necessary to examine a practitioner as to his methods of treating patients, sick or wounded,

in order to know whether he is or is not an intelligent and educated man; nor is it necessary for the elevation of the profession. In the Board of Health of the State of Illinois three schools of practice are represented. The board, satisfied that the applicant has received the degree of doctor of medicine from a school in good repute, could easily omit the subject of therapeutics or treatment. If we would expect good results from State medical examining boards we should certainly not introduce into them an element of discord. We should remember that the American people will not tolerate any thing which has the appearance of illiberality, and that sectarian medicine flourishes best with a certain amount of opposition which the advocates of new systems of practice may construe into persecution.

This brings us a step nearer to these institutions and to a closer inspection of the study of medicine in them; and what we have to say in relation to preliminary studies, examinations, matriculation, lectures and easy graduation, applies to all, irrespective of the so-called schools of practice. As we have intimated the government of the United States has no control over them, and the government of the several States do very little more than grant charters, or authorize the courts to do so. The result is, that the medical schools of our country are allowed to run their branch of business to suit themselves.

All who are interested in the solution of this very complex problem, are pleased to know that a few of the leading schools of our country have recently made an effort to raise their standard. Their trustees and faculties have apparently become aware of the absurdity of attempting to build up a learned profession upon the popular axioms referred to; and hence they have abandoned the old methods of educating medical practitioners by repeating the same lectures to the same students, by having no preliminary examinations, irregular attendance and a hurried examination just before graduation. As a substitute for this, they have agreed to a preliminary examination, or

some literary degree, as an equivalent, a three years graded course of study, laboratory work, and numerous examinations before graduation. This is a movement in the right direction, and too much praise cannot be bestowed upon Harvard University for taking the lead. Thus far, however, the institutions that have followed in good earnest, may be counted on the ends of our fingers. Indeed we may say that no other medical school in the country has adopted a higher standard than Harvard, and yet it is far below that which is required by the same institution for admission into the freshman class of her literary department.

How many, of the 3,951 who obtained the degree of doctor of medicine from our medical schools during the year of 1884, are prepared to take a place in a learned profession, is not for me to say; but a careful study of the "Conspectus" referred to, will show that one-half have no higher literary attainments than are needful for the teacher of a primary school in a rural district.

But lest we should be charged with attempting to make an argument without premises, we quote from a recent announcement of one of the largest, and most popular of our medical schools. Under the heading "Special Matriculation Examinations," we find the following. "It is assumed that practitioners sending their students to the College, have satisfied themselves that their pupils have received a proper preliminary education, and the college does not require a matriculation examination." This is surely a remarkable statement! Previous instructors are to judge of the fitness of the student to enter the institution! Certainly no classical school, or even normal school would make such a statement before the public.

Another announcement under the heading—"Requirements for Admission"—informs the profession that the applicant must have "at least a fair English education." There is not a word said about a preliminary examination.

Still another institution which is accustomed to turn out more medical doctors annually than any other in our

country informs us in its last announcement, under the heading—"State Examinations"—that matriculates who desire to be examined in English studies will have an opportunity of undergoing such examination before a committee of the faculty." This is also a remarkable statement to make to a learned profession. Is it not rather made on the supposition that the profession is not learned? The student may be examined if he desires it! The examination is made for the accommodation of the student!

We might refer to the announcements and catalogues of a large number of medical schools in our country, in many of which preliminary attainments and examinations are passed over in silence. They are not even mentioned. We might also appeal to the knowledge of all present and to the experience of the profession in general, as to the very meagre attainments of many who are admitted into our medical schools; but it is not necessary. The inferences we draw are conceded.

1. That preliminary examinations are not instituted, as a rule, in American Medical colleges
2. That classical studies are generally treated with indifference.
3. That the degree of doctor of medicine is often conferred upon persons without education, or even a knowledge of English grammar, or of orthography.

The conclusion is that the faculties of the medical schools of our country know very little about the literary attainments of many of those upon whom they confer the degree of doctor of medicine. It would seem that they prefer not to know whether their students can read, write and cypher or not. Indeed, the policy so generally adopted and carried out, during the last fifty years, makes it certain that they cannot know whether their students can spell the simplest words in the English language. They refuse to institute preliminary examinations and as far as possible place the responsibility upon the preceptor who is often a mere sinecure.

Almost any person can find a preceptor in our country towns and villages, and even in our larger cities, and it is quite as easy to find a medical school in which to matriculate. Both encourage the student to believe that it is not a difficult matter to graduate, and he is not generally disappointed. He learns, among other things, that he can obtain the degree of doctor of medicine from a respectable medical school in a year and a half after matriculation. He need not concern himself about a term of service in the office of a preceptor. The system of apprenticeship has long since passed away. He learns too that he can obtain the degree from an institution a little less respectable in eight consecutive months—a winter session and a short summer session. And he also learns from the numerous announcements sent to all practitioners, that in sectarian medicine, it is scarcely necessary to think of a preceptor or any definite number of months of study. Two hundred dollars will pay for boarding, books, lectures and diploma. Is it any wonder that some of our medical schools have been tempted to throw off the mask and openly engage in the diploma traffic. This is about what we may read between the lines of that excellent address by Dr. William Pepper in 1877 in which he advocates a three years graded course of lectures as a *reform remedy*. He had not the full consent of his associates to speak on the subject, and he was painfully certain that one-half of the young men who were present to hear him, seniors and juniors, could not tell the genitive case of the noun, homo, from any other case; and therefore he was obliged to touch very lightly upon preliminary studies and examinations. Shall we tell it in New York that the oldest university in America does not require a knowledge of the five declensions of Latin nouns for matriculation in her medical department? And still we love our Alma Mater!

We cannot place the responsibility of easy graduation upon the preceptor, the student or the people. The institution is a chartered body. The people, with very good reason, look to our medical schools for competent practi-

tioners in whose hands they may trust their lives. They do not object to thorough preparatory training. The government gives the institution full power. It has the authority to teach, to conduct examinations and to confer degrees. This last chartered right carries with it a high responsibility. If the degree of doctor of medicine is not a guarantee to the people that the bearer is competent to perform the delicate and responsible work of the practitioner, then it is a fraud and a pretence. The institution is created for the high purpose of deciding who is fit to receive the degree; it is allowed to charge a fee; and it is justly held responsible for the competency of the graduate.

With these brief references to the medical schools of our country—their low requirements for admission—their courses of instruction and the responsibility of easy graduation we pass to consider with equal brevity, their influence upon the several grades of students who attend lectures in them from year to year. It is not our intention to delay upon the abstract question, as to the value of one branch of study over that of another, in the slow process of mental discipline. We desire to take a more practical view of the subject. From the most reliable sources of information we have access to, about five per cent. of all practitioners who have the degree of doctor of medicine in the United States have also some academic degree. To this small percentage may be added a much larger percentage, possibly twenty per cent. who may be regarded as well prepared to engage in professional studies. We may assume for the sake of convenience that they have all studied mathematics, languages, rhetoric, logic, mental and moral philosophy, and as much chemistry, geology and astronomy as is usually taught in respectable classical schools; that they have spent five or six years in these several departments of useful study; that they have the mental discipline resulting from mathematical demonstrations repeated a thousand times, so important for the development of the reasoning faculties; that they have enjoyed the advantages of analysis and synthesis in the

study of languages; and that their moral and aesthetic faculties have been exercised by the study of moral philosophy and belles lettres. To all such we would say that they have laid a solid foundation upon which to add professional studies. Their education has been in all directions, not merely one class of mental faculties, but all have been exercised and disciplined. They are therefore capable of taking a reasonable view of all subjects brought to their attention. The experience of the best informed people in older countries than ours, has decided in favor of these studies, preparatory to the study of medicine and we are not prepared to set up a counter opinion. Mental discipline and studious habits are necessary for the proper study of human anatomy, human physiology, pathology, the theory and practice of medicine, surgery, obstetrics *materia medica* and medical jurisprudence, and to all having thorough preparatory training these studies cannot fail to be of great advantage in the further developement of the mind. And to the practitioner, in all of the remainder of life these several departments of study, academic and professional, must afford ample scope for the exercise of his talents. At the same time there must be connected with the routine employment of every day a consciousness of being able to do better work than is possible with less education. And besides there are constantly open to him fields of useful labor into which the uneducated can never venture.

Another portion of our profession—possibly one fourth in consequence of irregular and abbreviated courses of preparatory study may be regarded as having a much lower degree of mental culture. They have pursued to a certain extent some of the studies mentioned and neglected others. They have set aside, it may be, the most important, because they are the most difficult to master. They have advanced as far in algebra as quadratic equations, and in geometry, as far as the *pons asinorum*, and failed to get over the bridge. In Latin they have reached the Bucolics of Virgil, or the Jugurthan war by Sallust,

and in Greek the third book of Xenophon's *Anabasis*. Of rhetoric, logic, mental philosophy and moral philosophy they know nothing. Instead of five or six years of academic training they have enjoyed the advantages of one or two.

To all persons having these limited attainments the study of medicine has been rather a means of information than of education. The foundation which they have laid is neither deep enough nor broad enough. They have merely made a beginning. They have not become sufficiently acquainted with first principles. Subjects and predicates, axioms and corollaries, premises and conclusions they have scarcely thought of. Of the art of English composition—paragraph making and essay writing—they are in a great measure ignorant.

To illustrate, let us take the case of one, whose circumstances, with these attainments, have been most favorable—the ambitious, and it you please, talented son of a well-to-do and successful practitioner. He has been induced to believe that he is fully prepared for professional studies. Entering his father's office as a student, he has all the advantages of an excellent library, clinical instruction, and frequent professional visits among the poor. He attends lectures in one of the best medical colleges of our country, and at the end of three years passes a creditable examination (oral of course). His subject for a thesis is agreed upon; and as is customary, he reads all he can find in relation to it, and then proceeds to arrange his thoughts upon paper. It is his first effort at scientific composition, and he remembers that he has never attempted an essay of greater length than a single page of foolscap. As might be expected, he fails; at least he discovers that he cannot write as other men do. Scorning the suggestion of a classmate who is in the same predicament as himself, that a few dollars would pay for a better thesis than either of them is able to write, he once more makes an effort to comply with the requirements of the institution; but is obliged to call in a friend, to arrange his paragraphs—

that is, write his thesis. Proud of his *alma mater*, and of his degree, he returns home to receive the congratulations of friends; but he secretly feels ashamed of himself that the son of an aristocratic family should fail to write a medical thesis. He hopes however to make up for his loss by diligence in reading and study. Five busy years pass rapidly around; he has gained a large practice; has read many valuable books, professional and literary, and made many efforts at essay writing, but as often failed. Post-graduate lectures and polyclinic instruction are offered, and these he embraces as the cure-all—the sovereign remedy. Once more he returns to the active duties of his profession, but his inability remains. Another busy five years pass around and when it is too late, he discovers his mistake. His first and last contribution to the literature of his profession is carefully filed in the archives of his *alma mater*, with many others of the same kind. The moral is, that medical studies, however faithfully pursued, cannot be substituted for academic studies. Here and there a man of extraordinary talents has succeeded with these attainments by returning to academic studies, but not otherwise. Only 44 medical schools in our country require a thesis.

We would like to dwell upon this subdivision of our subject, if time permitted, as it is upon these preliminary attainments that our best medical schools are based. The present standard of Harvard for minimum requirements is below that of the Canadian schools, as any one will discover, who takes the pains to inquire; so that we have no institution in our country whose medical degree is a guarantee of a liberal education.

But what shall we say of the remaining half of our profession? Certainly nothing disrespectful—nothing unkind—nothing that is untrue. The number is entirely too large—possibly 45,000.\* Of course we do not include the non-graduate class of practitioners. They are not properly in the profession. We speak only of the alumni of medical schools whom we have a right to address as

brothers. We have not placed any part of the responsibility upon them; nor do we propose to do so. They know well, that they have made a mistake which they can never correct; but we cannot so easily exonerate the faculties of our medical schools, who induced them to accept of easy graduation, and the degree of doctor of medicine. They have never even glanced at the academic studies referred to, and consequently they are without the mental discipline and training which these studies always bring. They came from our primary schools, from the plough and the work-shop. They found the doors of our medical schools open, and having two or three hundred dollars to spend, they entered without being asked a single question. Preliminary examinations were not required: in a few months or weeks they received the degree of Doctor of Medicine: for we have medical schools to suit all classes of society.

Some of this large class of practitioners are honorable men, and hold respectable family connections; but the greater part have no higher objects in view than those of self interest. They stand aloof from all medical societies; they take no interest in the advancement of medical science or in the elevation of the profession. They prefer not to be bound by any code of ethics or morals; not a few of them hang upon the outskirts of the profession, ready to engage with the charlatan in all kinds of unprofessional, and, if the truth could be spoken, criminal practices. How can an institution apply the words, *virum honorabilem et ornatum*, or the words *optimum quemque ornau* to persons with such qualifications?

To all of this class of our profession the study of medicine has, it is true, been a means of information or knowledge, but we can not say that it has been a means of education or mental discipline. Those who have carried some of the less difficult academic studies, along with the study of medicine, have made proportionate advancement in mental training, but not otherwise.

In support of these views we need scarcely do more

than refer to the experience and frequent acknowledgments of the better part of this class of practitioners. After twenty, thirty, or forty years of reading and study of medical books, they confess their inability to contribute a single line to the literature of their profession, or to express themselves in a creditable manner on any scientific subject.

To this we might add the experience and observations of others—especially members of the legal profession who have carefully watched this new method of educating medical practitioners in the United States. In no situation does the medical doctor of this class exhibit his want of education to so great a disadvantage as on the witness stand, in the presence of a learned court, skillful attorneys-at-law and a large audience. If he is required to testify in a case of insanity and is asked to give some account of the faculties of the mind, he looks bewildered, and makes an effort to say something about the lobes of the brain. He has never read a page of mental philosophy, and he knows as little of the faculties of the human mind as he does of the constellations of the heavens. These exhibitions occurring frequently in our numerous county courts are often indeed pitiable as well as disgraceful to our profession and our country. If anything of importance or of interest occurs in their practice they are unable to report it; and thus it happens that their experience is lost to the profession and to the people.

Their mental discipline or training is very much like that of another class of citizens—non-professional men—who have read many books, scientific, historical, religious, political and miscellaneous. They have also heard many lectures, speeches and sermons, and yet they remain uneducated. They have knowledge, and it may be a large amount of it, stowed away in the chambers of the mind, but they can not add a single paragraph to what they have read or heard. Should they continue to read books and to hear lectures, the process would be one of accumulation not of education.

If it were needful to add any thing more, we would say that medical studies are not elementary; they do not contain the first principles of knowledge or science; they cannot be taken as material out of which to lay a foundation. They are essentially professional, and can not be substituted for academic studies; the means are not suited to the end.

In conclusion allow me to refer to one or two points which have not been made sufficiently prominent.

As already intimated, there has grown up in our country a sentiment which has been endorsed by prominent men and hence has become popular, that the study of medicine may be substituted, at least in part for academic training. So generally has this theory of education been adopted, that it almost seems to be a presumption to oppose it. *Nec Hercules contra plures!* At first an apprenticeship of three years, with a preceptor and two courses of lectures were supposed to be sufficient in a new country. Year after year passed around, and the final examinations, becoming less and less creditable, the quiz-master was introduced and then the auxillary faculty. But these methods failing to give satisfaction, post-graduate courses of lectures and polyclinic instruction were added. All this—we say it with due respect—may be set down as so much Yankee invention. In no civilized country, except in our own, is it supposed that medical practitioners can be properly educated without regular courses of academic study. The degree of doctor of medicine costs the student in Great Britain, France, Germany, Russia, Austria, Switzerland, Italy, Spain, Brazil, and even in revolutionary Mexico, not less than four years of academic training, and in some five or six. In the Canadian provinces, the minimum requirements for matriculation are fixed by law, and they are respectable. In our States, independent and boastful, the schools act without the restraints of law. Reading, writing and arithmetic are considered quite sufficient, as a foundation upon which to build a learned profession.†

Nor can medical instruction, served up in any other manner, be more easily digested by the uneducated. All systems of instruction should indeed be graded; but those institutions which have recently adopted a three years graded course of medical lectures and at the same time are matriculating students without regular or at least protracted courses of academic study, should reconsider their resolution. A learned profession, in a great country, rapidly taking the first place among nations, cannot afford to make use of ingenious and delusive methods of education. What we mean to say, in brief, is this:—that didactic lectures—lectures at the bed side of the patient—exhibitions of skeletons, muscles, blood vessels and nerves—pathological specimens and chemical experiments—will never educate the mind of the spectator, any more than exhibitions of King Lear, or the Merry Wives of Windsor. The student must become an active agent, not merely a passive one. He must work out problems in mathematics for himself, if he has not done so; he must translate foreign languages into good English, if he has not done so; he must prepare an original essay every week for four or five years, before he is properly prepared to study medicine.

One word more. This Academy was not organized for the purpose of dictating to our brothers, residing in independent States what kind of legislation they should advocate as a remedy for the numerous evils to which we have referred; but we may repeat and emphasize what others have suggested, that state medical examining boards, with full authority to examine all practitioners of medicine, surgery and obstetrics, irrespective of degrees and schools of practice, will do more to elevate our profession than all other means combined. In this way a literary, as well as a medical standard, may be erected and maintained in each state. Boards of health may be invested with such authority, and we would suggest a careful study of the methods adopted by the board of health of the State of Illinois. We should trust our governors to appoint such board under an impartial law.

\* It is estimated that there are now in the United States 120,000 medical practitioners, including non graduates.

† Printed for circulation among professional men.



